

No. C 61591	Reinstatement Annual Report Form ADMIN DISSOLVED 10/05/2011		2. Registered Agent and Office (NOT A P.O. BOX) LOUIS J BARIBAUT 422 S JACOBSON RD JACOBSON SANDPOINT ID 83864														
Return to: SECRETARY OF STATE 450 N 4th STREET PO BOX 83720 BOISE, ID 83720-0080 REINSTATEMENT FEE DUE: \$30.00	1. Mailing Address: Correct in this box if needed. SWHIFT FIREPLACE SYSTEMS, INC. LOUIE BARIBEAU 422 S JACOBSON ROAD <i>Little McGhee Road</i> SANDPOINT ID 83864 USA		3. <u>New</u> Registered Agent Signature.														
4. Corporations: Enter Names and Business Addresses of President, Secretary, Directors, Treasurer, Vice Pres. <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or PO Address</th> <th>City</th> <th>State</th> <th>Country</th> <th>Postal Code</th> </tr> </thead> <tbody> <tr> <td>President</td> <td>Lou Baribeau</td> <td>422 Jacobson Rd</td> <td>Sandpoint, ID</td> <td>USA</td> <td>83864</td> <td></td> </tr> </tbody> </table>				Office Held	Name	Street or PO Address	City	State	Country	Postal Code	President	Lou Baribeau	422 Jacobson Rd	Sandpoint, ID	USA	83864	
Office Held	Name	Street or PO Address	City	State	Country	Postal Code											
President	Lou Baribeau	422 Jacobson Rd	Sandpoint, ID	USA	83864												
5. Organized Under the Laws of: IDAHO C 61591		6. Signature:  Date: <u>2/5/13</u> Name (type or print): <u>Lou Baribeau</u> Title: <u>President</u>															

Issued 02/05/2013 by PEH

INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM